

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 15-047923

City of Birth		County of Birth		Florence	
Name at Birth	DAVID WRIGHT	Sex	Male	Date of Birth	Sept. 25, 1915
Full Name		Wilson Wright		Race or Color	Black
Birth Date		Place of Birth		State or Country	South Carolina
Maiden Name		Meta Hennix		Race or Color	Black
Birth Date		Place of Birth		State or Country	South Carolina

The above statements are true to the best of my knowledge and belief.

David M. Wright
 LEGAL SIGNATURE OF PERSON REGISTERED IF 18 YEARS OLD OR OLDER. SIGNATURE OF PARENT OR GUARDIAN IF PERSON REGISTERED IS UNDER 18 YEARS OF AGE.

Subscribed and sworn to before me this 23rd day of February, 1983
 at Florence, South Carolina
 (County) (State) (L.S.)
 NOTARY SEAL
 My Commission expires January 20, 1987
 Notary Public *Rev. C. Maurer*

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document		Place issued	Date Filed
1	Brother's birth cert. #139-20-035461	Columbia, SC	Oct. 12, 1920
2	Florence Country Club employee record	Florence, SC	Feb. 10, 1964
3	Independent Life & Acc. Pol. #0616647A	Jacksonville, FL	Sept. 23, 1974
4			

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1		Wilson Wright	Meta Hennix
2	9-25-15	Florence, SC	
3	Age 59 next BD		
4			

I hereby certify that no prior birth certificate is on file for the person named on this delayed birth certificate.

Registrar: *Ann Blumens*Date filed: *Feb. 28, 1983*

I have reviewed the evidence submitted to establish the facts of birth. The abstract of the evidence appearing above accurately reflects the nature and contents of the document.

Rev. C. Maurer Deputy Registrar II
 Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE